

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DR	70884-2-10	
O.P.E. CLASSIFIER		8	9-26-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		11-3-01	

INDEX OF CLAIMS

✓ ----- Rejected N ----- Non-elected
 o ----- Allowed I ----- Interference
 - (Through numeral) ----- Canceled A ----- Appeal
 + ----- Restricted O ----- Objected

Claim	Date
1	1/27/01
2	2/1/01
3	2/1/01
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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